

CANCERS APPEAR IN THE FAMILY

Grief
Acceptance

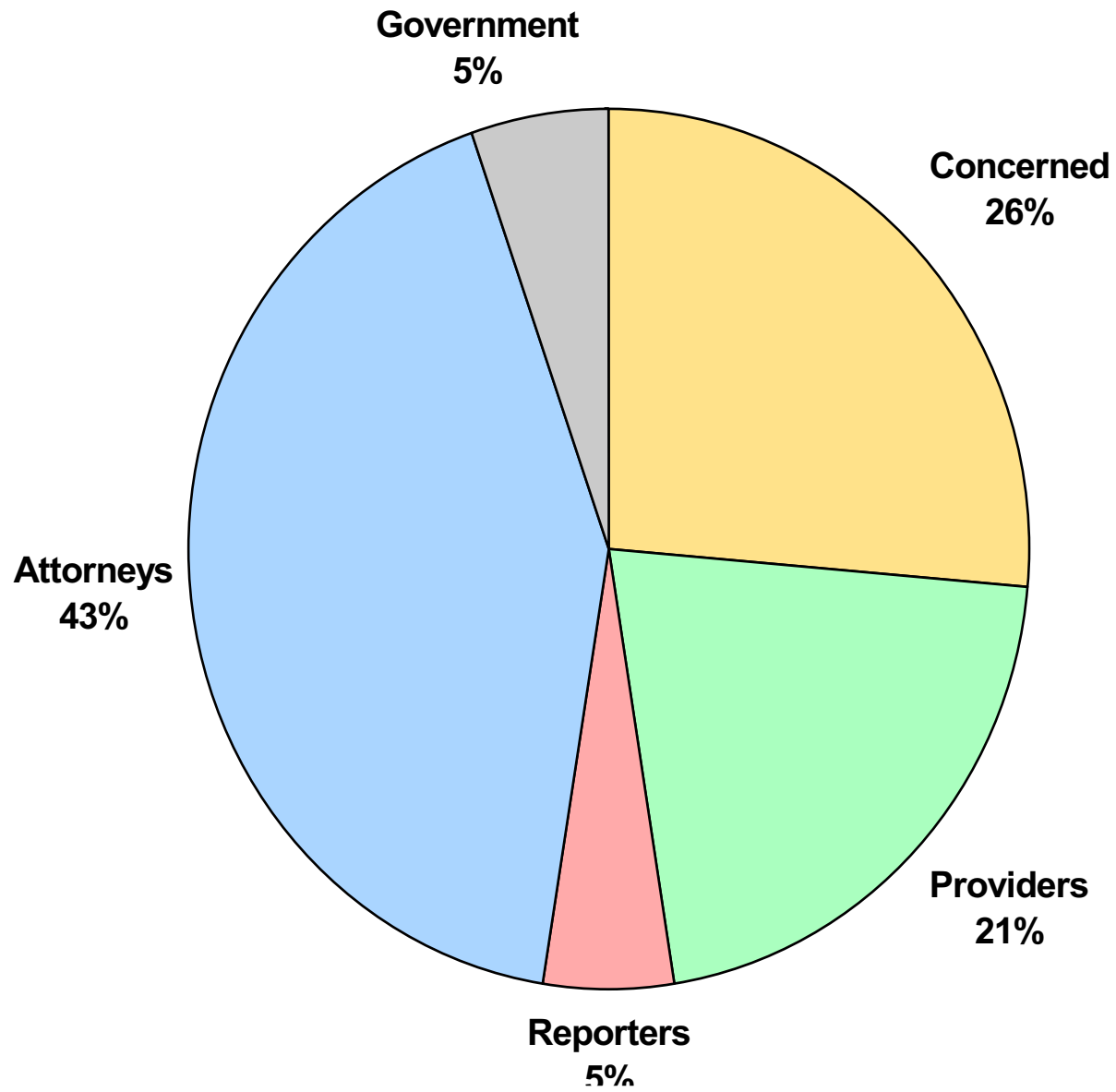
CANCERS APPEAR IN THE NEIGHBORS

Fear
Suspicion

LAY MISUNDERSTANDINGS

- **CANCER IS A SINGLE DISEASE**
- **MORE THAN ONE CASE IS A CLUSTER**
- **CLUSTERS ARE DUE TO POLLUTION**
- **MUST BE A NEARBY TOXIC RELEASE**

Cluster Reports



EL GRECO, GOYA, AND
THE SUBLIME
JED PERL

DEAN V. CLINTON
RYAN LIZZA

WWW.TNR.COM ► NOVEMBER 24, 2003
**THE
NEW REPUBLIC**

TOXIC

Erin Brockovich's Weird Science
ERIC UMANSKY

All the Vice President's
Men. Upcoming, a report
on Dick Cheney by Spencer
Ackerman and Franklin Foer.



Environmental Carcinogens are Everywhere

- Hexavalent Chromium
- Methylene Chloride
- Benzene
- Trichloroethylene
- Carbon Tetrachloride
- Vinyl Chloride
- Asbestos
- Dioxins
- Polycyclic Aromatic Hydrocarbons

Two approaches to responding to this problem

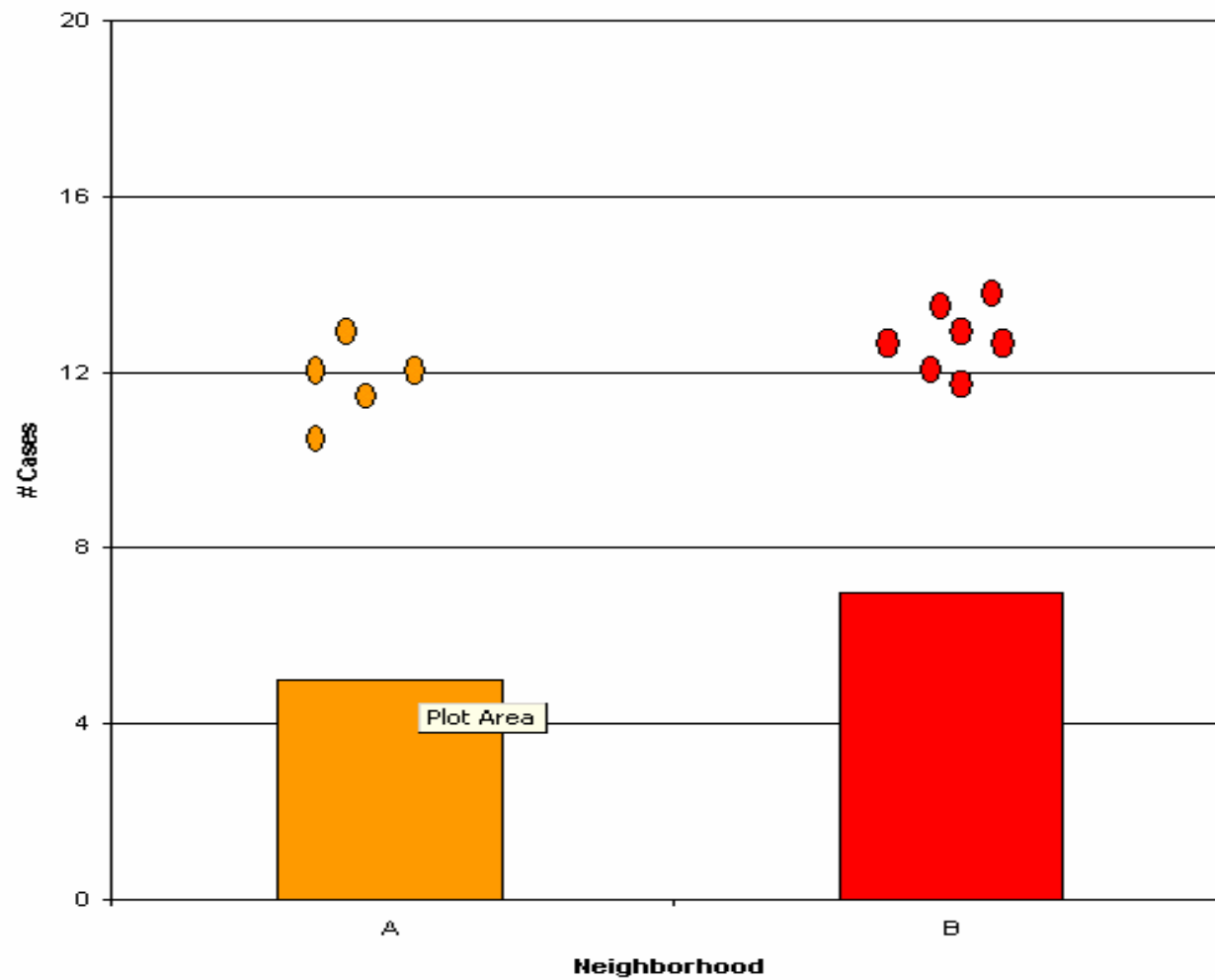
- **1. Given a carcinogenic emission, how much risk (how many cases per population) would one expect to result?**
- **2. Can we see any evidence of an increased risk (an increased number of local cases)?**

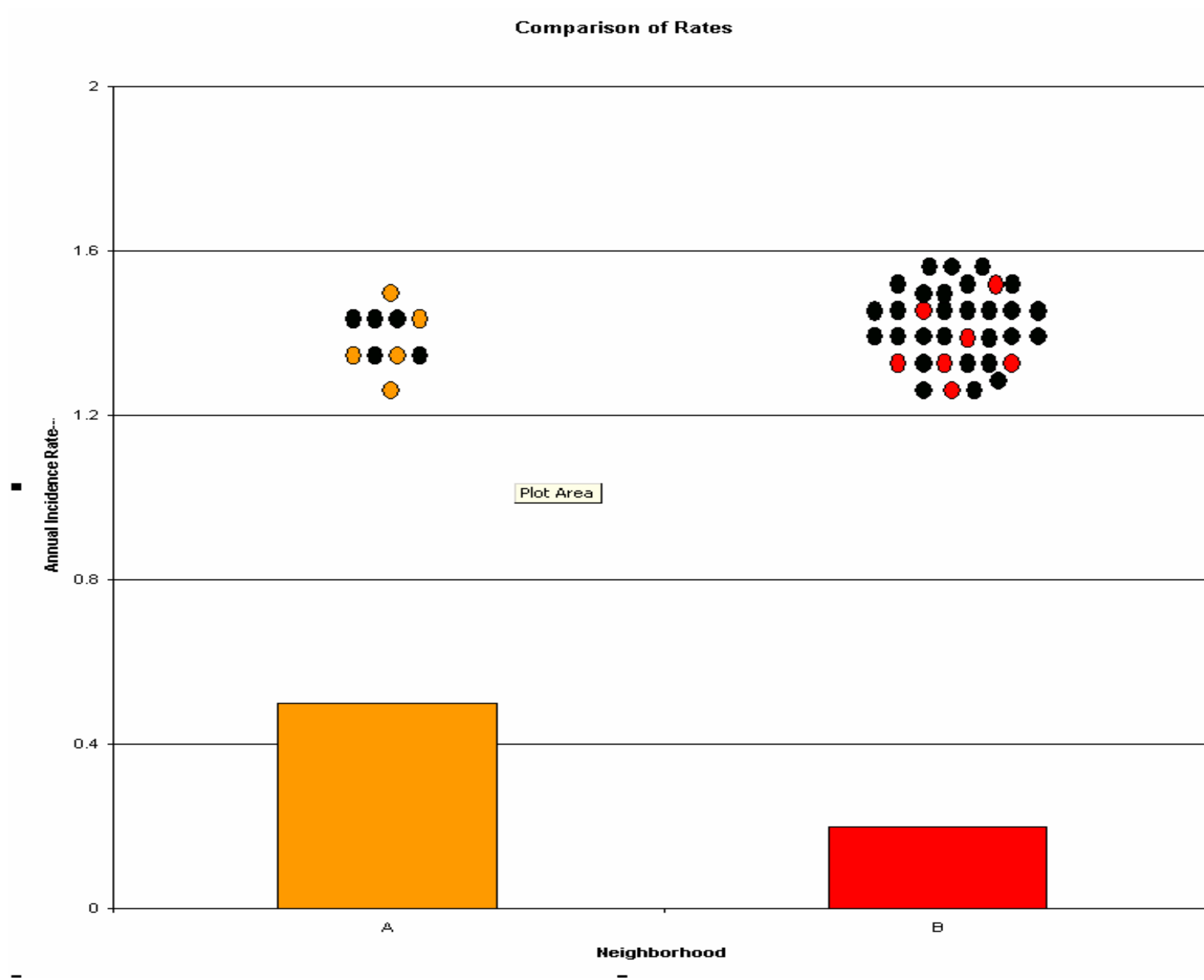
How many cases would result from an emission?

Should be easy to tell!

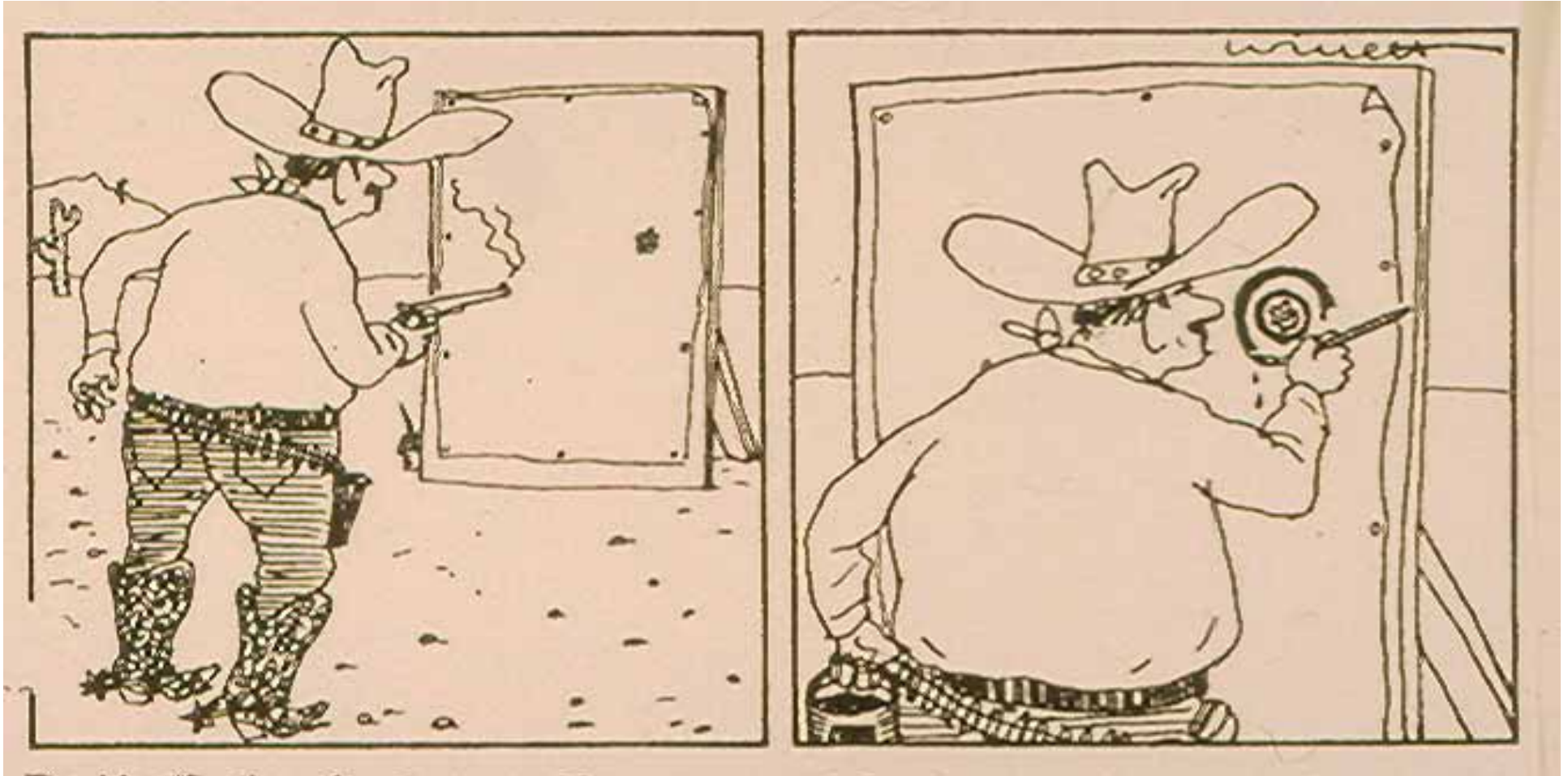
- Identify exposed
- Measure exposure
- Define cases
- Count cases
- Compare to baseline

Comparison of case number



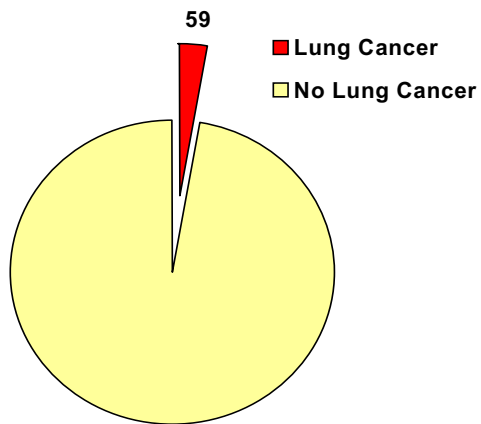


“TEXAS SHARPSHOOTING”

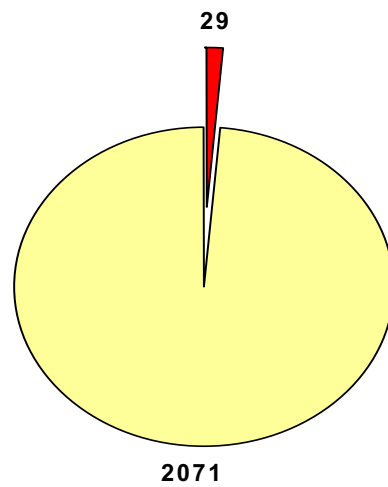


**AIM, SHOOT, AND ONLY THEN--
DRAW THE TARGET**

**Workers with Long Term
Hexavalent Chromium Exposure
(180-1400 microgram/cubic meter)**

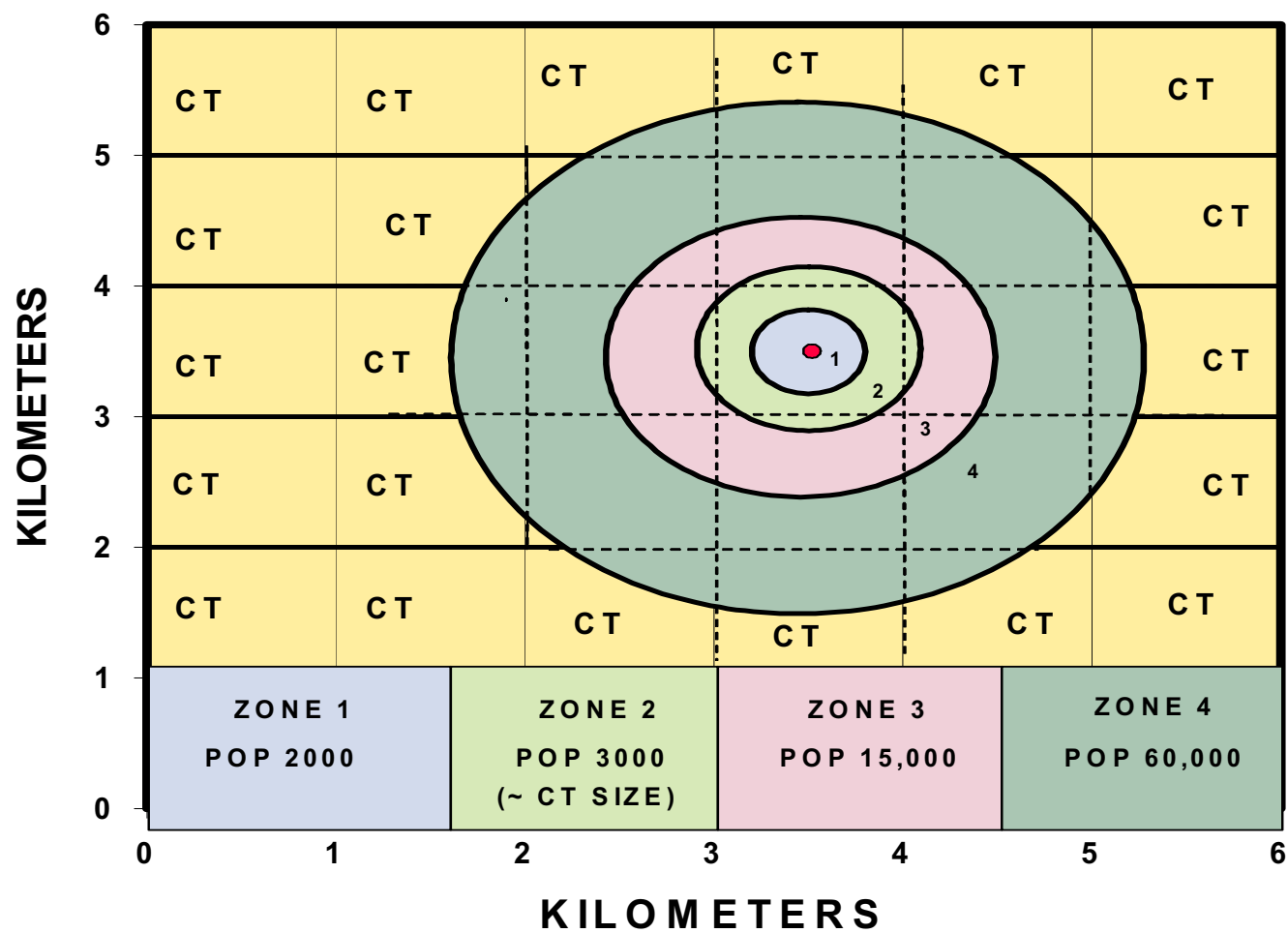


Unexposed Persons



(Hayes, et al, 1972

Hypothesized Point of Urban Carcinogen Emission



Community Exposure to Environmental Carcinogens

Carcinogen	Job Dose	Job RR, Cumulative Risk	Highest Emission Dose	Job Dose/ Emission Dose
Hexavalent Chromium	180-1400 mcgm/CC ³	~2 ~1% cum	<0.05 mcgm/CC ³	>3600
Benzene	112-320 mlgm/CC ³	~ 6 ~1% cum	<0.002 mlgm/CC ³	>56000
Methlene Chloride	486-1648 mlgm/CC ³	~1 (no excess— Animal Carcinogen)	<0.1 mlgm/CC ³	>4860
Vinyl Chloride	40-312 ppm	~16 ~1% cum	<<1 ppm	>>40

It is more likely that environmental cancers come from exposures that are less localized but more widely disseminated, long-lasting, and cumulative.

Alternative approach

- FOCUS CONCERN ON “X CANCER” INSTEAD OF “CANCER” GENERALLY
- SHOW EACH UNIQUE PATTERN, DESCRIBE RISK FACTORS FOR EACH MALIGNANCY:
- PROVIDE SERVICE TO RESEARCHERS
- PROVIDE ASSESSMENT OF LOCAL RISK AND SHOW THAT OTHER LOCALITIES ARE AT SIMILAR RISK:
PROVIDE SERVICE TO CITIZENS
- FORCE RECOGNITION OF THE ROLE OF CHANCE AND BIAS--ADDRESS CONCERN ABOUT “CLUSTERS”
- SEARCH FOR UNEXPECTED PATTERNS
PROVIDE SERVICE TO COUNTY

CANCERS
— *in the* —
URBAN ENVIRONMENT



Residential Patterns in Los Angeles County

THOMAS M. MACK



RATIONALE

- **URBAN CONTRASTS SHARPER THAN NATIONAL ONES**
 - EXPOSURES
 - LIFESTYLES AND ETHNICITY
- **LA IS THE MOST HETEROGENEOUS COUNTY**
- **> 30 YEARS OF UNIFORM REGISTRY EXPERIENCE**
- **TAKE ADVANTAGE : PERCEPTION OF PERSONAL RISK
COMMANDS ATTENTION**

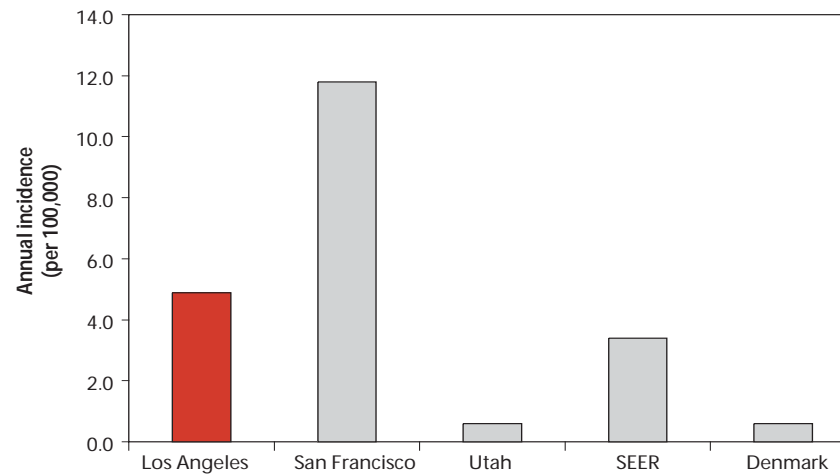
Malignancies according to Annual Incidence /100,000

- **>75:** M Lung, Prostate
F Breast
- **25-74:** M Colon
F Lung, Colon
- **15-24:** M Rectum, Melanoma, Oropharynx, Bladder, NHL
F Endometrium, Ovary
- **10-14:** M Stomach, Pancreas, Kidney
F Rectum, Melanoma, Cervix, NHL
- **5-9:** M Esophagus, Larynx, Liver, Testis, Brain, Myeloma
F Oropharynx, Stomach, Pancreas, Bladder, Kidney, Thyroid
- **2-4:** M Mesothelioma, Sarcoma, Kaposi Sarcoma, Thyroid,
Hodgkins lymphoma, ALL, CLL
F Esophagus, Liver, Sarcoma, Brain, Myeloma, Gallbladder,
Hodgkin Lymphoma, Anus, CLL
- **1:** M Small Bowel, Anus, Gallbladder, Biliary, Salivary Gland,
Osteosarcoma, Breast
F Small Bowel, Biliary, Larynx, ALL
- **<1:** M All Others
- F All Others

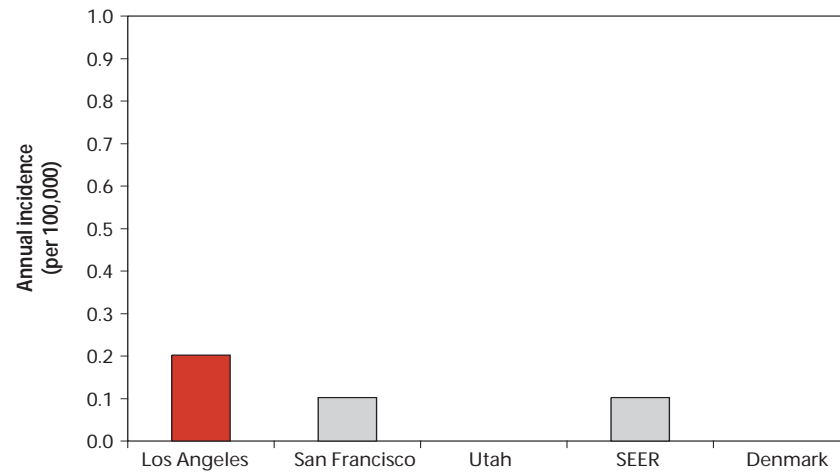
KAPOSI SARCOMA

mack-1-KAP.eps

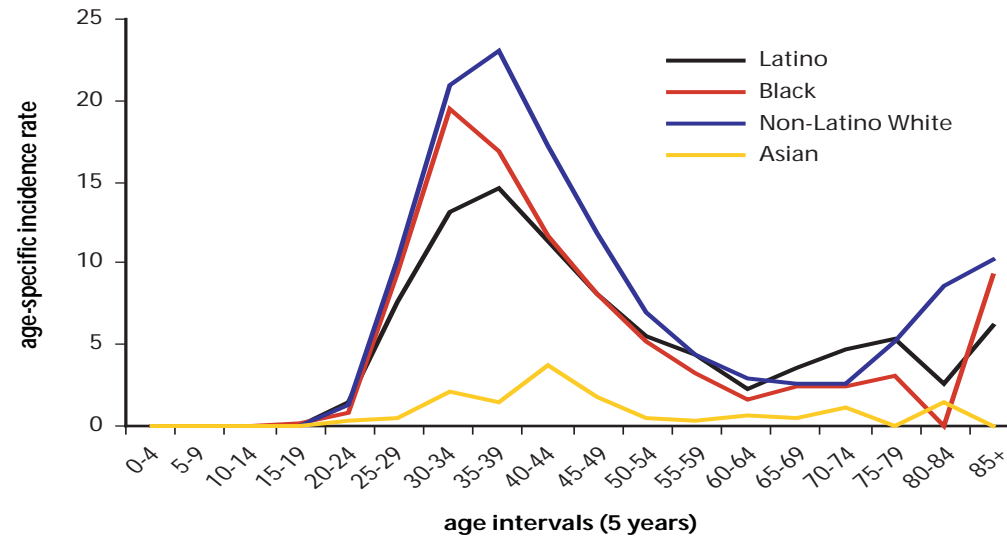
Incidence in Los Angeles County compared to other places
(males)



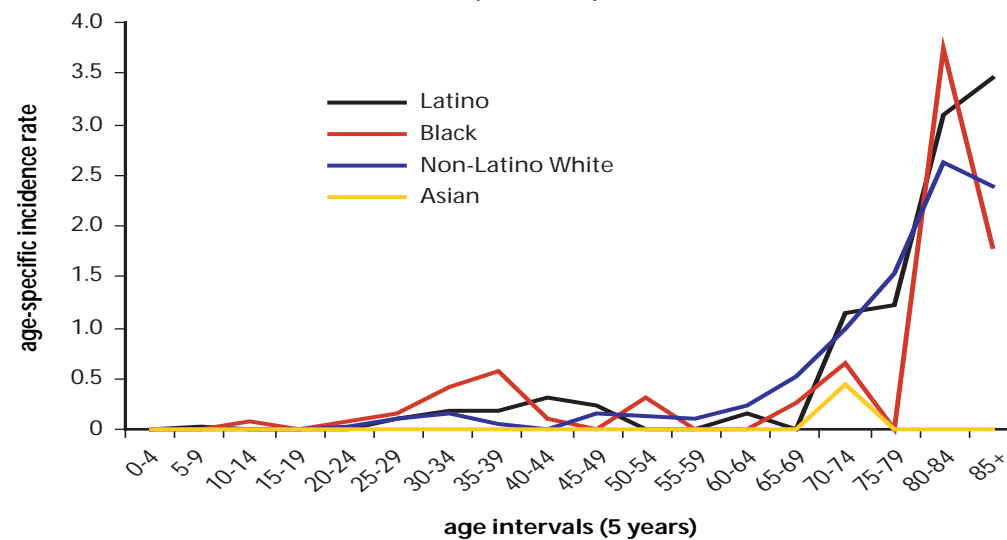
(females)



**Age-specific incidence by race/ethnicity
(males)**

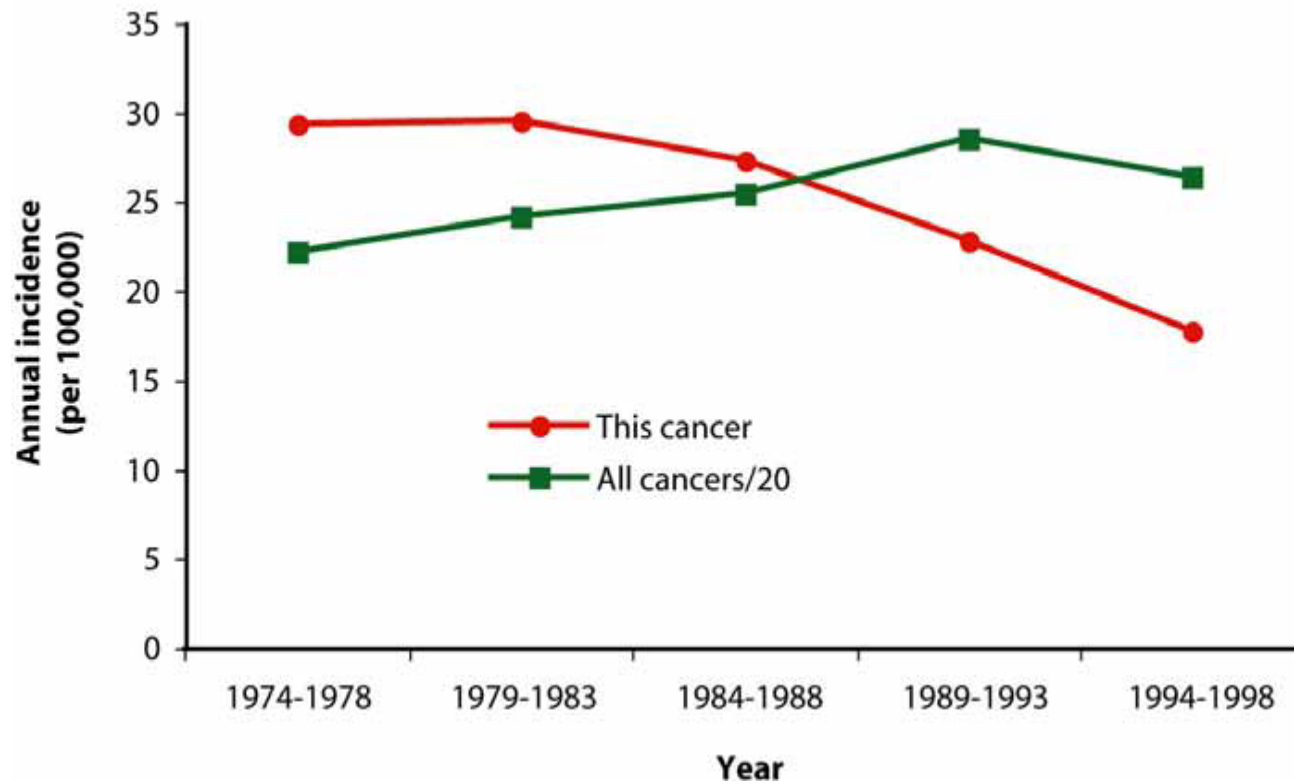


**Age-specific incidence by race/ethnicity
(females)**

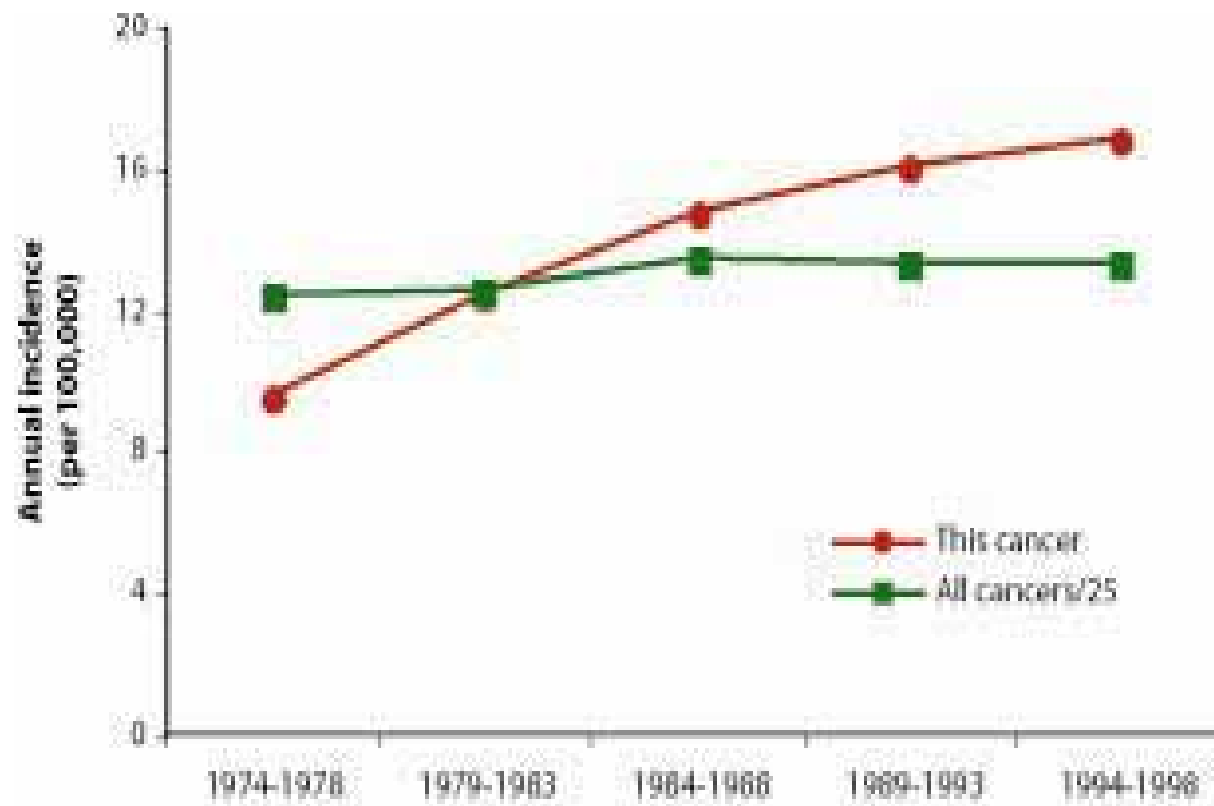


SQUAMOUS CELL LUNG CARCINOMA

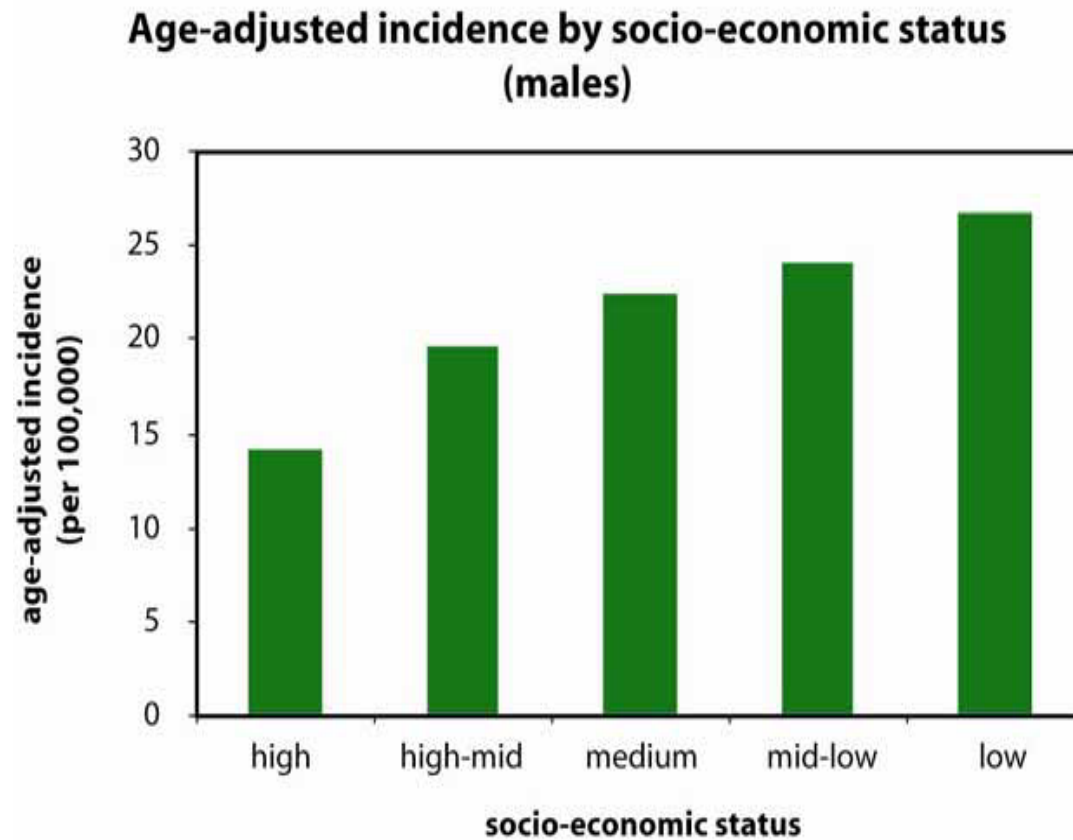
MALES: TREND OVER TIME



ADENOCARCINOMA OF THE LUNG FEMALES: TREND OVER TIME



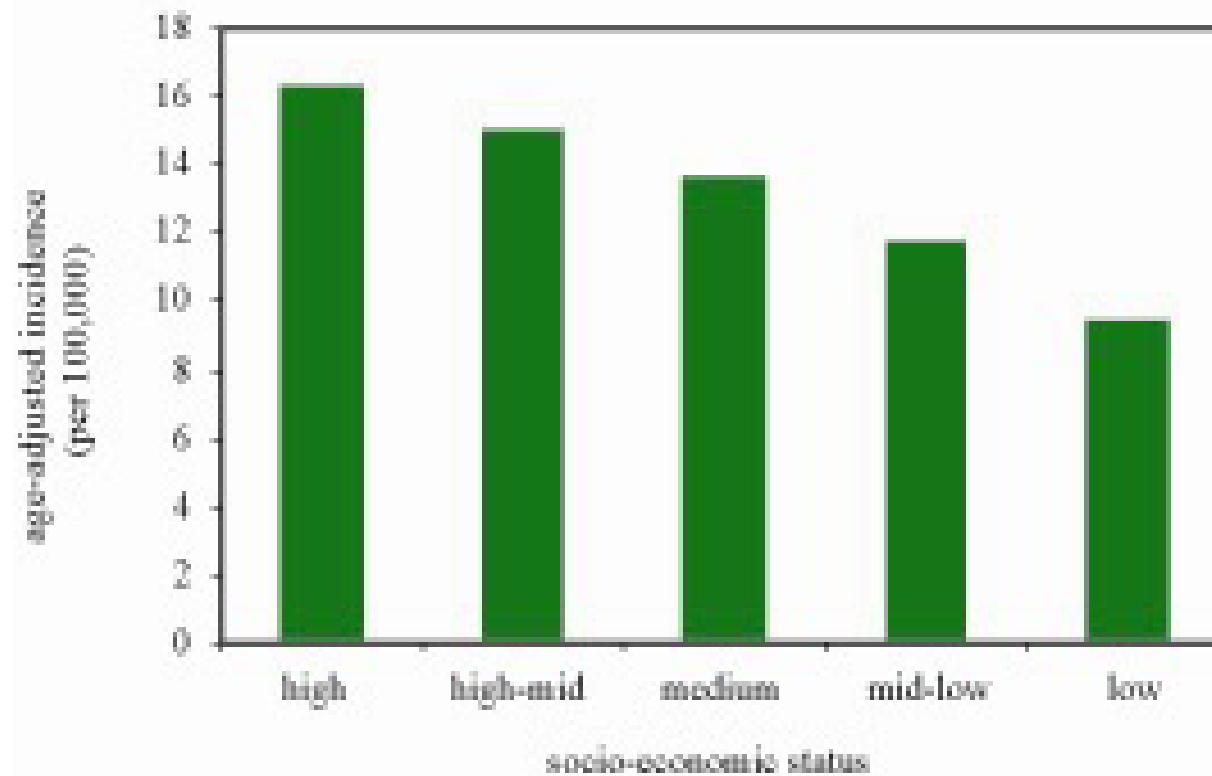
SQUAMOUS CELL LUNG CARCINOMA



ADENOCARCINOMA OF THE LUNG

AGE-ADJUSTED INCIDENCE, FEMALES

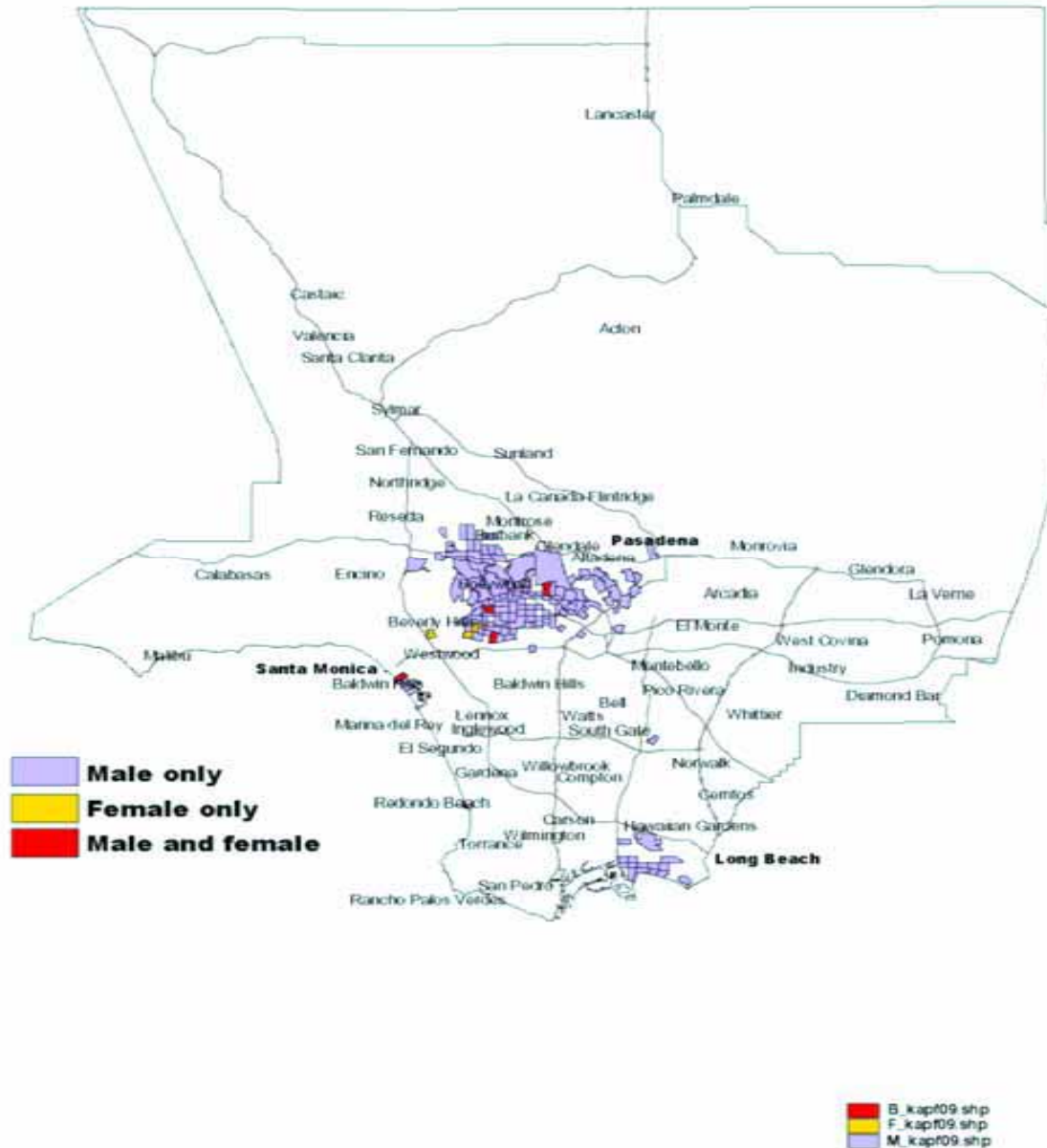
BY SOCIO-ECONOMIC STATUS



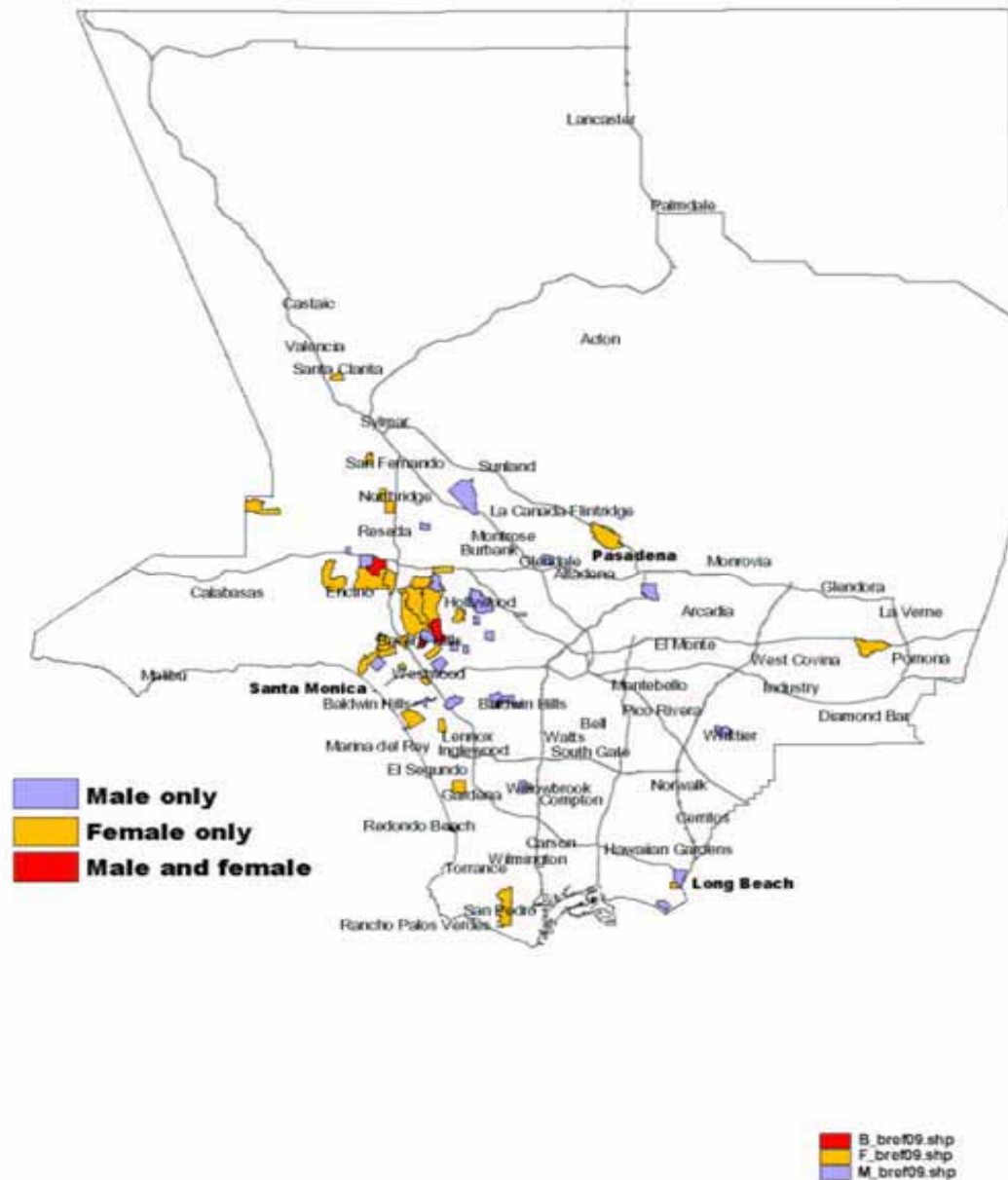
RESOURCES AND CHOICES

- **USC-LA CSP RECORDS**
 - 72 ENTITIES, 12 COMBINATIONS, 766,000+ CASES
- **BY AGE, SEX, RACE, DATE, SES, ADDRESS**
- **ARBITRARY DEFINITION OF HIGH RISK**
 - **> 3 CASES (1 CASE PER DECADE)**
 - **At least a 50% increase over county average**
 - **SIGNIFICANTLY EXCEEDS EXPECTED**

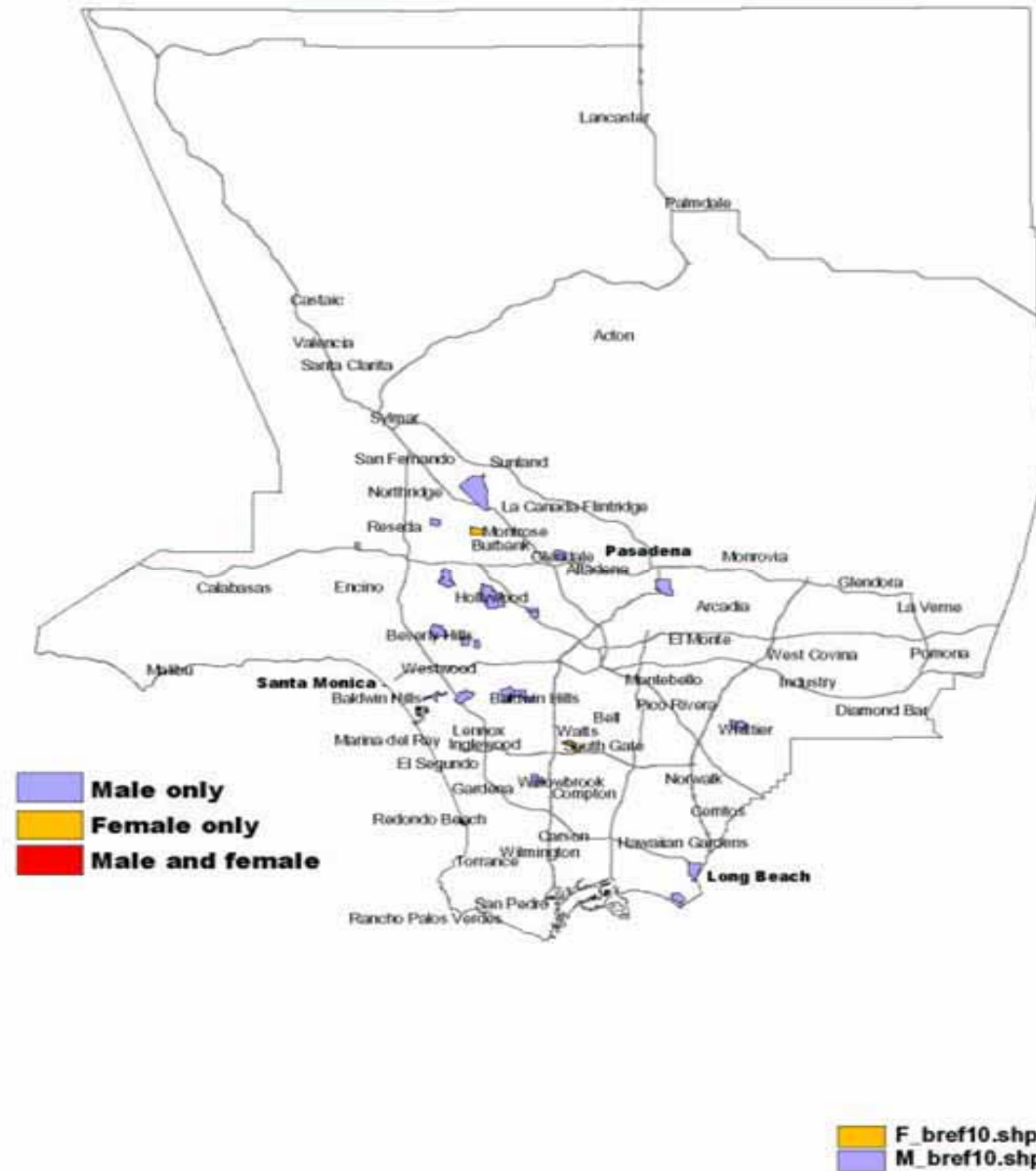
KAPOSI SARCOMA



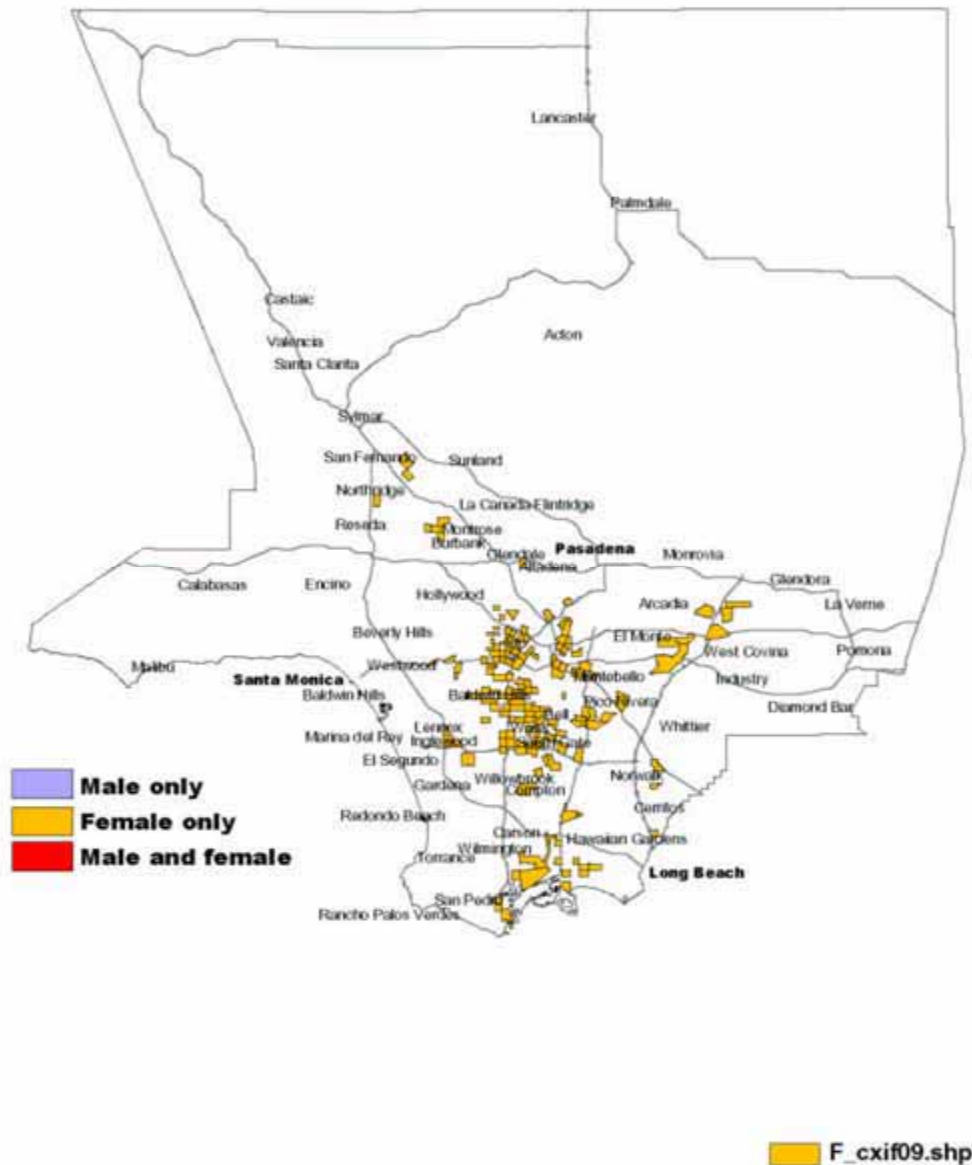
CARCINOMA OF THE BREAST



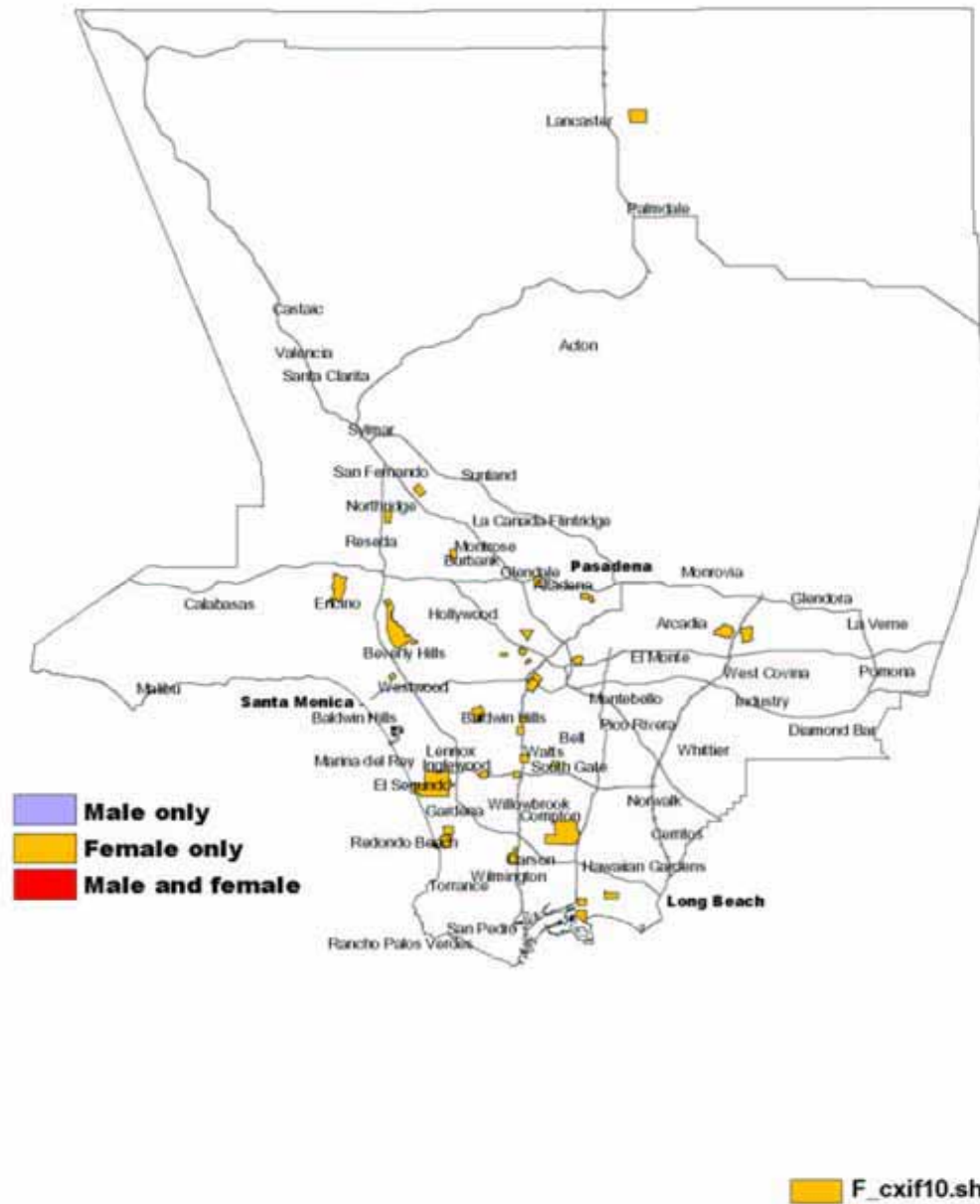
CARCINOMA OF THE BREAST



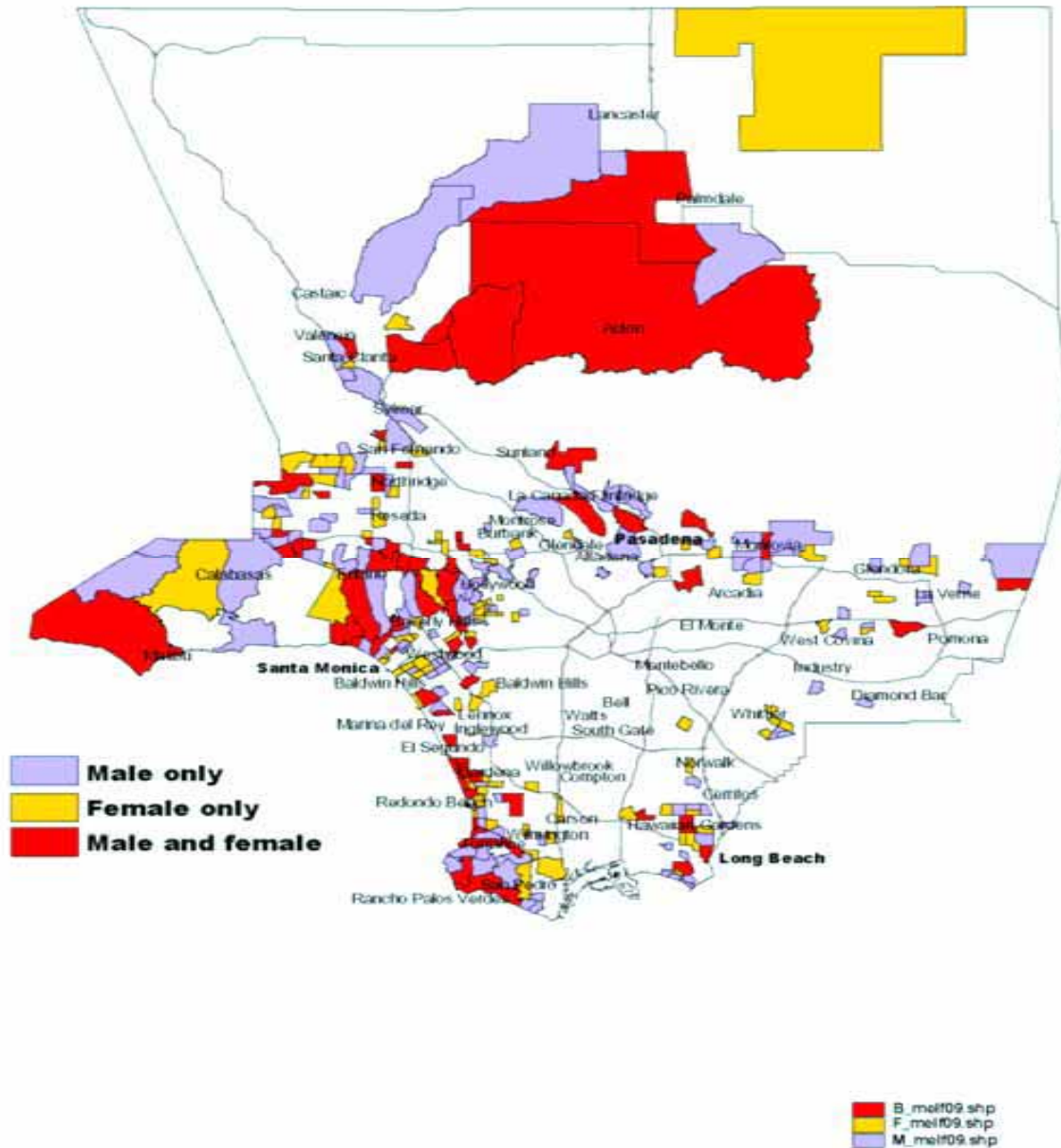
CARCINOMA OF THE CERVIX



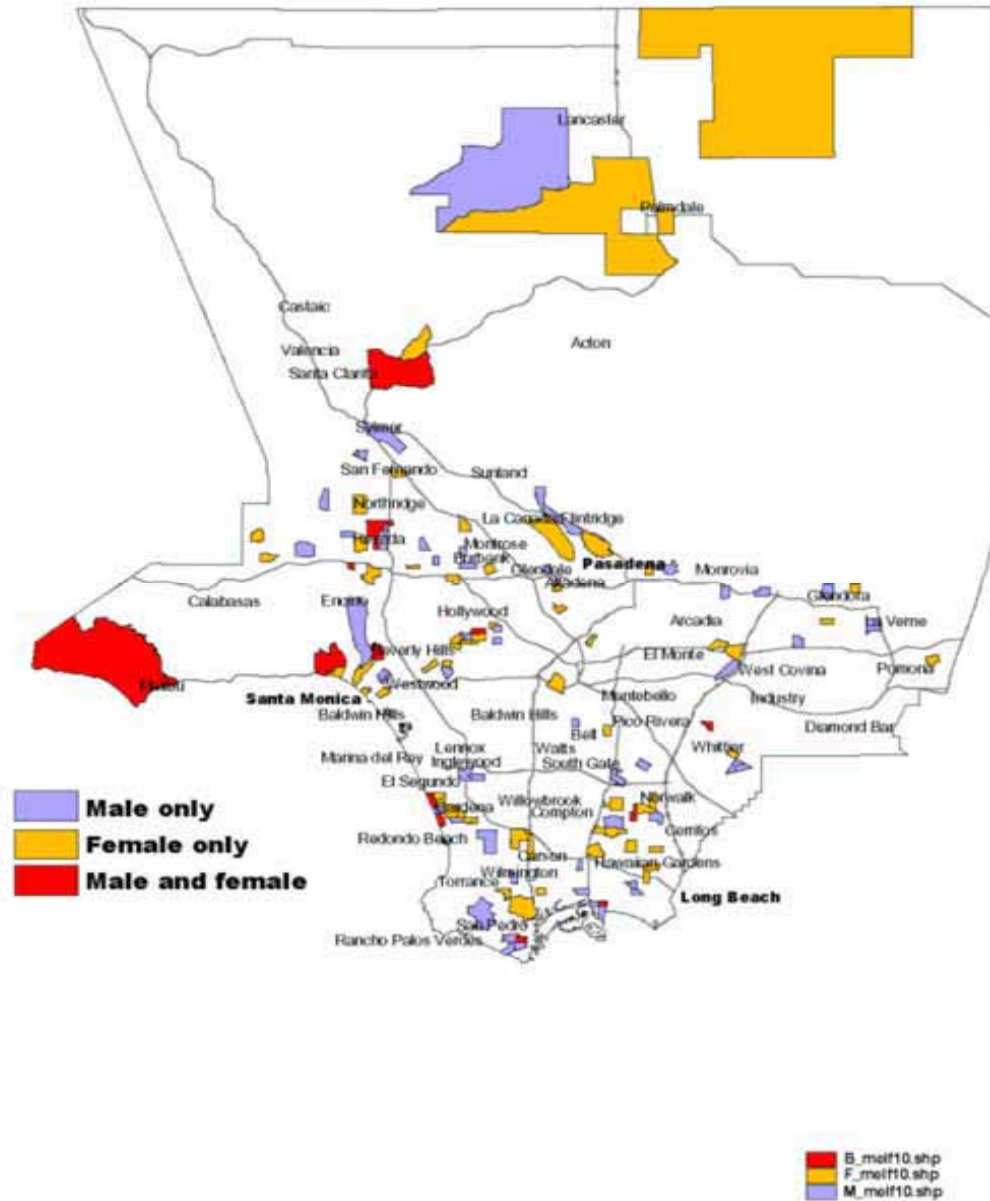
CARCINOMA OF THE CERVIX



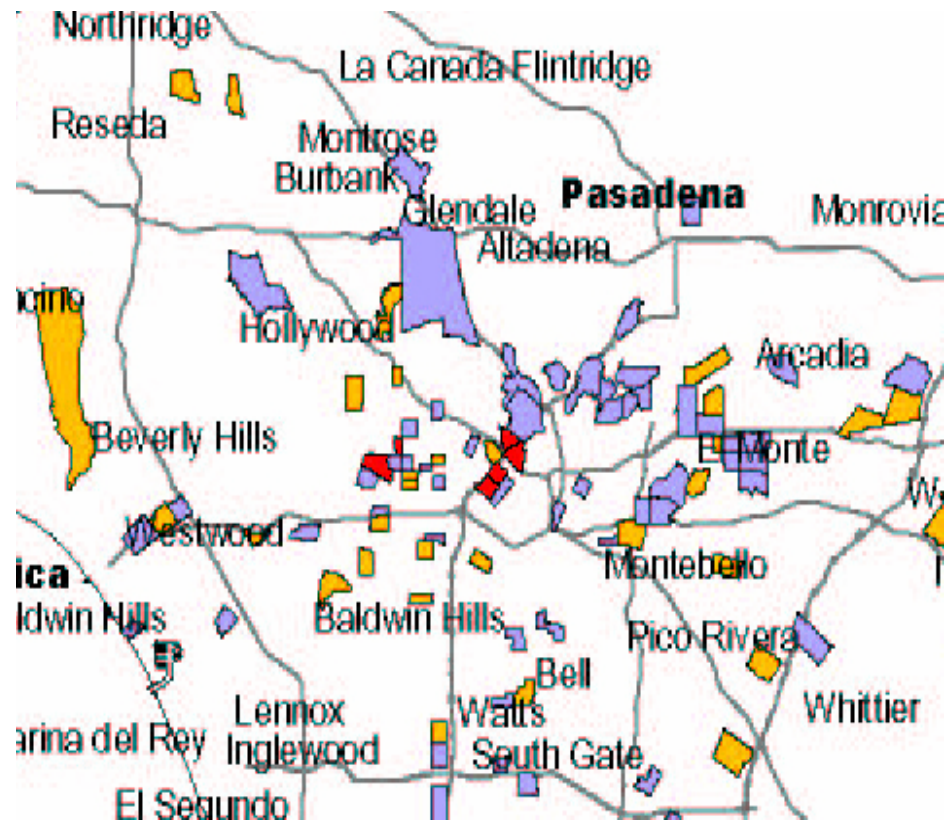
MALIGNANT MELANOMA



MALIGNANT MELANOMA



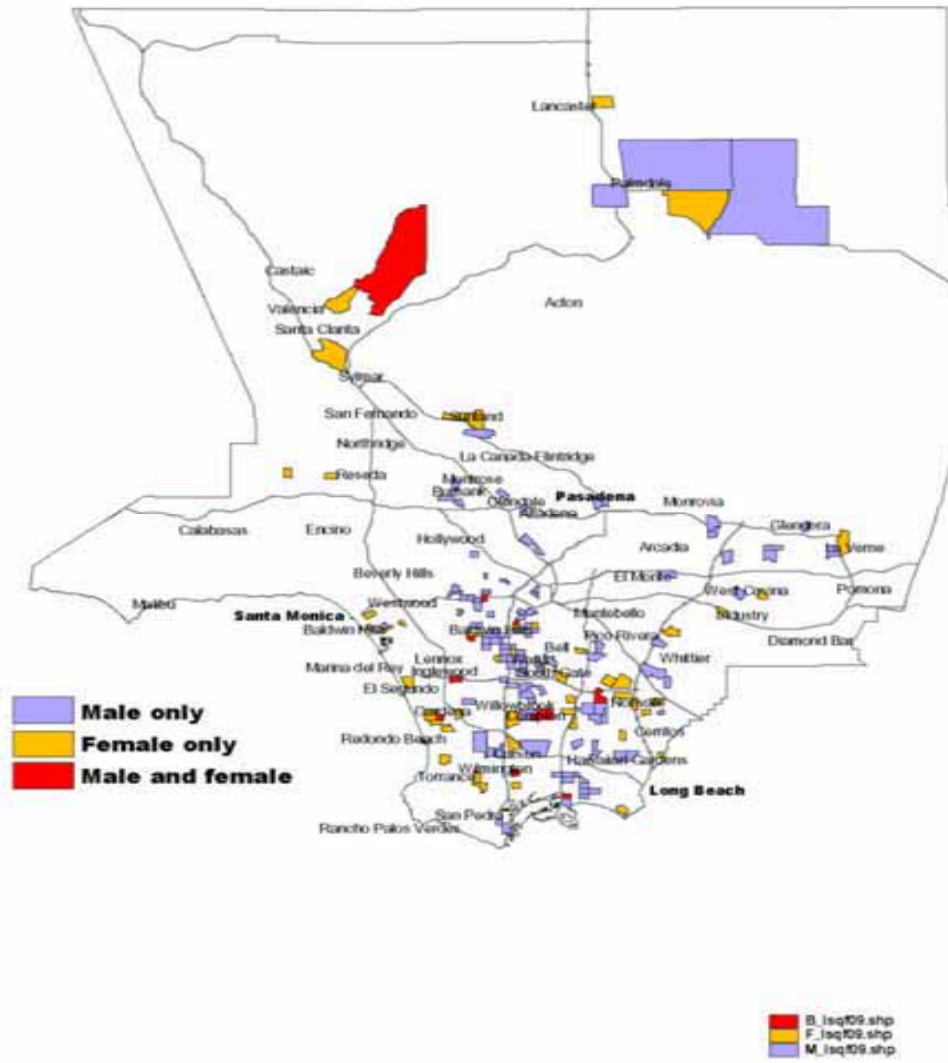
HEPATOCELLULAR CARCINOMA



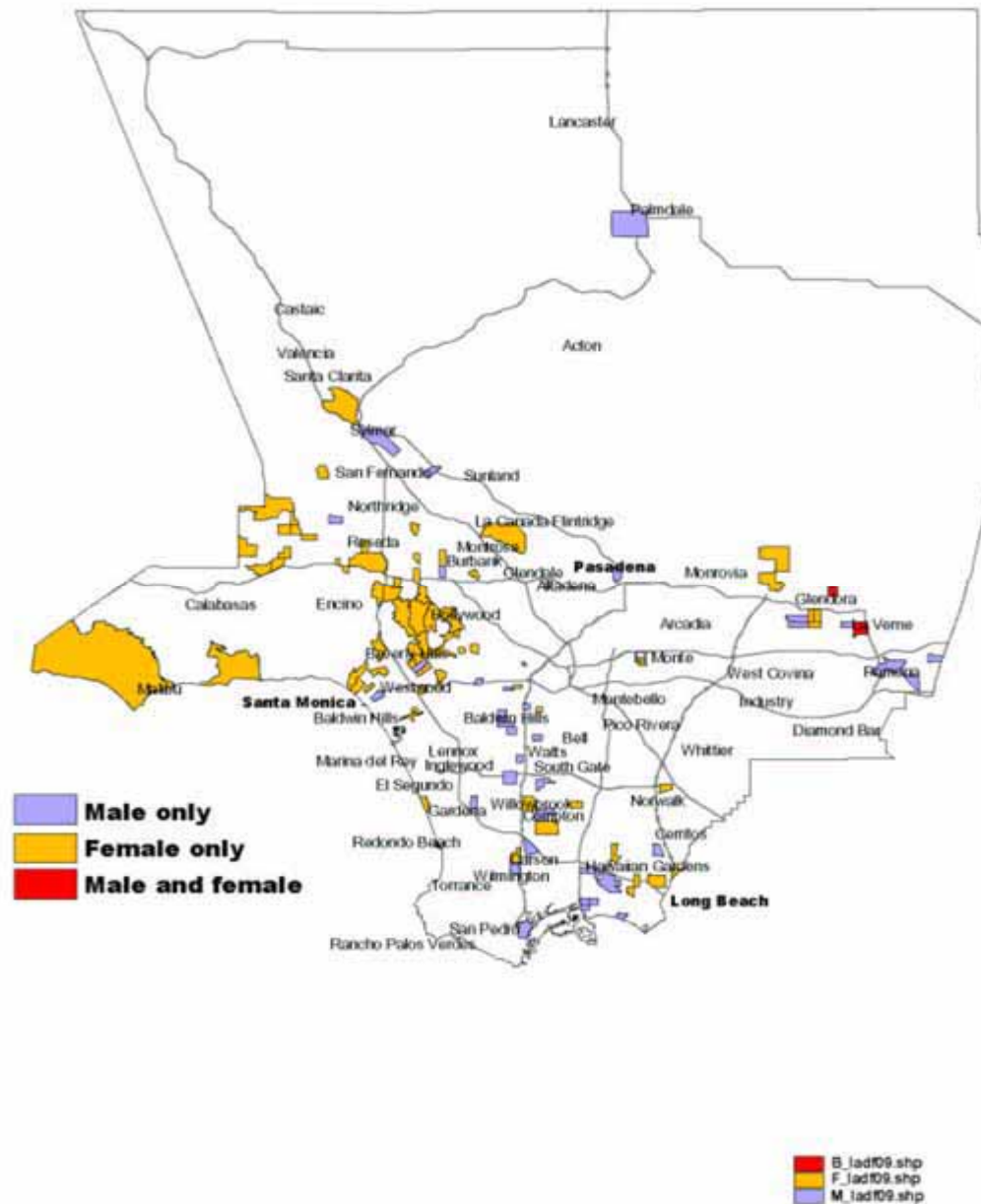
MALIGNANT MESOTHELIOMA

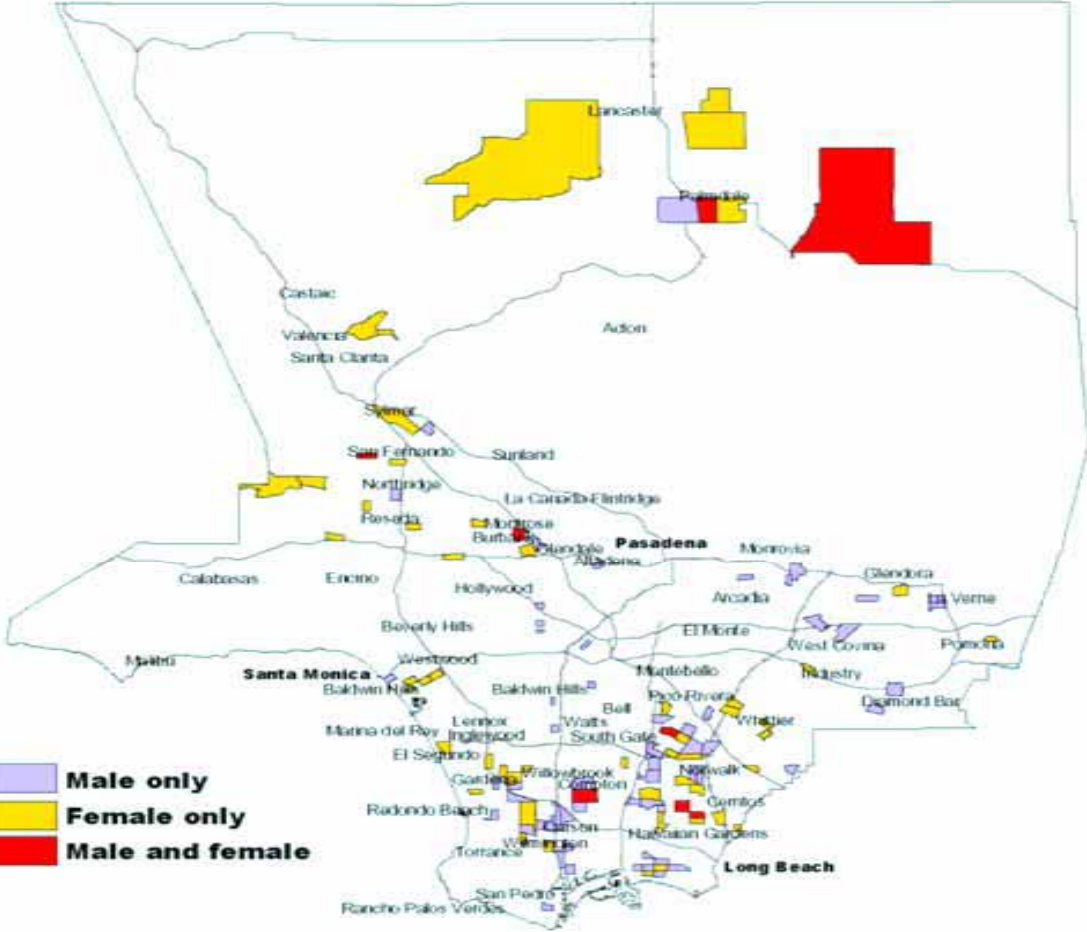


SQUAMOUS CELL LUNG CA

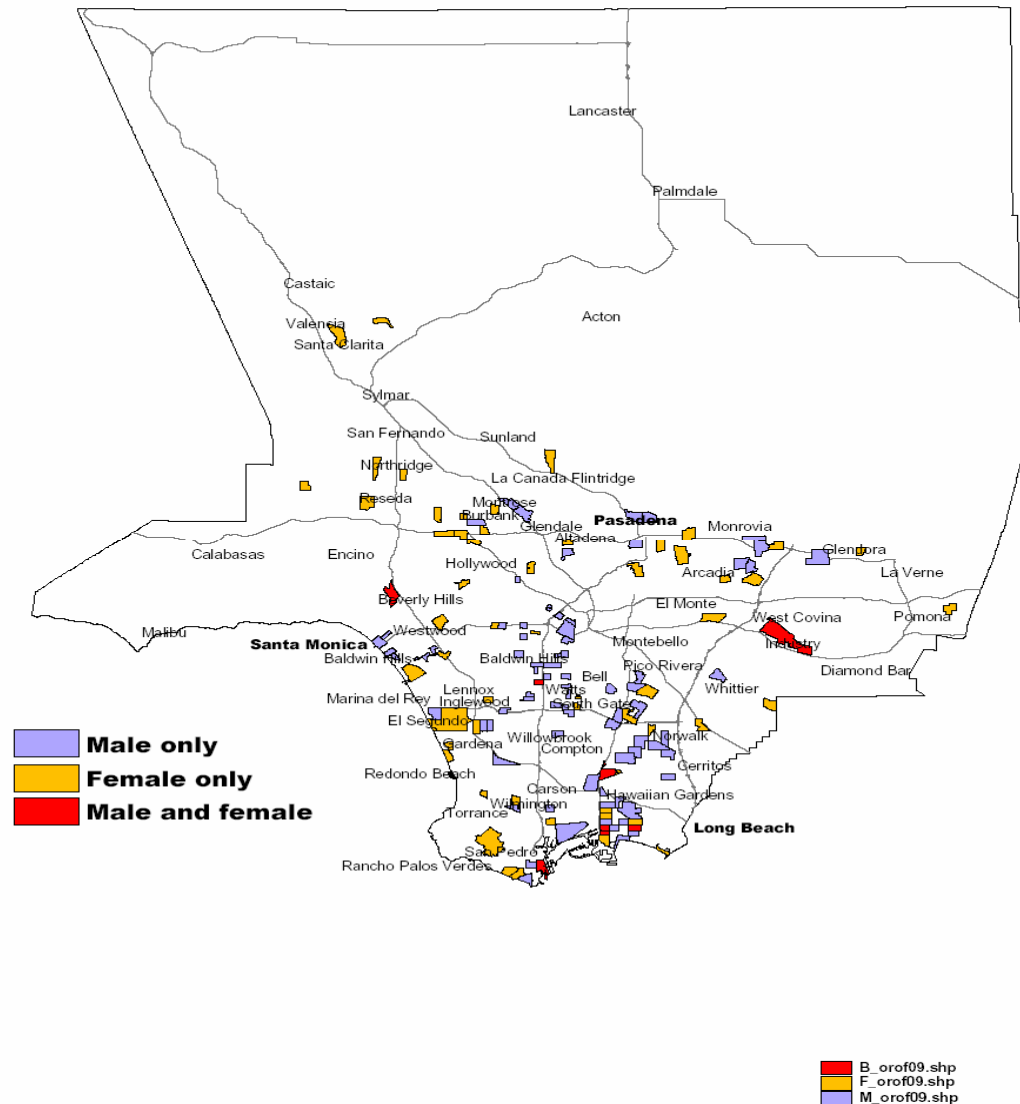


LUNG ADENOCARCINOMA

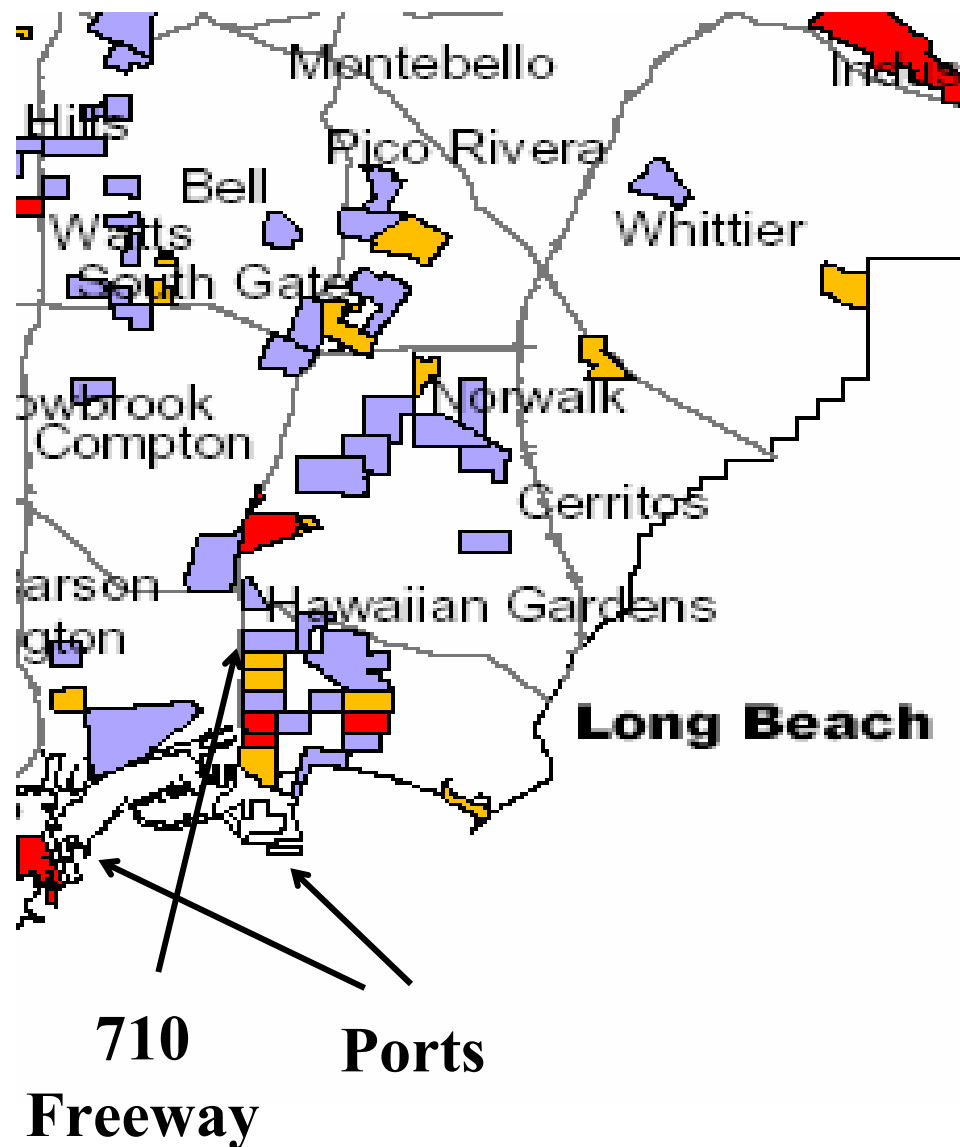




Carcinoma of the Oropharynx (known causes: smoking/alcohol)



Carcinoma of the Oropharynx

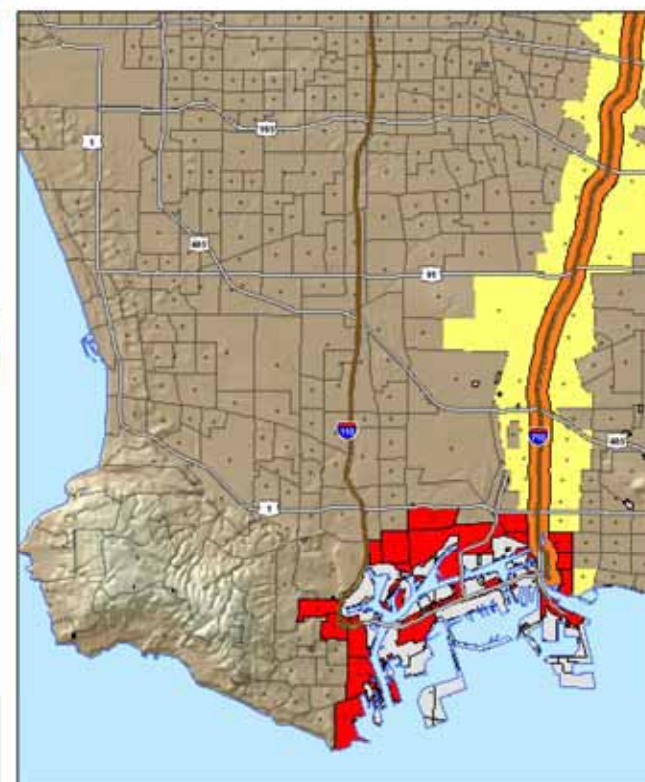
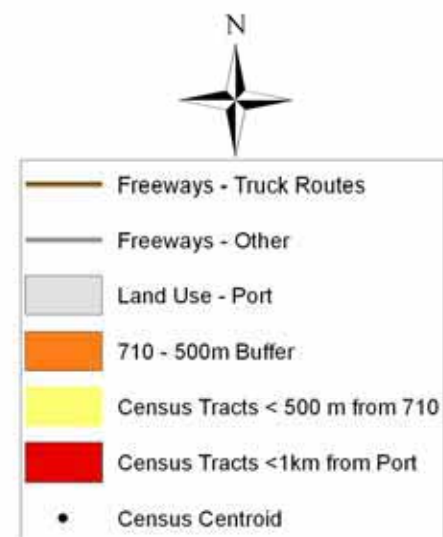


**Malignancies known
to be caused by alcohol/tobacco**

Mouth/Tongue Larynx Esophagus

**Malignancies known or suspected
to be caused by particulate pollution**

Lung (all histologies) Pharynx



Relative Risk of Tract Residents according to Proximity of Exposure

Malignancy	Sex	Referent	RR :Tracts East of 710 Freeway	RR :Tracts Adjacent to a Port
Lung (Squam.)	M/F	1.0/1.0	1.2*/1.1	
Lung (Sm. Cl.)	M/F	1.0/1.0	1.3*/1.3*	
Larynx	M/F	1.0/1.0	1.1/0.9	
Esophagus	M/F	1.0/1.0	0.7/0.8	
Mouth/Tongue	M/F	1.0/1.0	1.1/ 1.3*	
Pharynx	M/F	1.0/1.0	1.2/1.1	

***P<0.05**

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Lung (Squam.)	M/F	1.0/1.0		1.1/ 1.3*
Lung (Sm. Cl.)	M/F	1.0/1.0		1.3*/1.4*
Larynx	M/F	1.0/1.0		1.3*/0.9
Esophagus	M/F	1.0/1.0		1.1/1.0
Mouth/Tongue	M/F	1.0/1.0		1.5*/1.6*
Pharynx	M/F	1.0/1.0		1.3*/1.4*

***P<0.05**

Future Directions

- **Initiate particulate measurements in tracts**
- **Case-control and case-case studies:
compare cases of pharyngeal cancer in
these tracts to healthy persons and cases
elsewhere**
- **Stimulate observation at other port
locations**
- **Explore other unexpected non-random**